

Contract for Service Form

Rock Island-Milan School District 41

VENDOR NAME: Lexia EMAIL: kimberly.manzi@lexialearning.com

ADDRESS: PO Box 88315

Woburn, MA 01813

DATES OF SERVICE TO BE COMPLETED: 2025-2026 school year

SCHOOL DISTRICT CONTACT: Stacey Golz

COMPENSATION: \$ 54,666.67 (original 47,250)(EL \$7,416.67)

DESCRIPTION OF DUTIES:

original - Lexia Core5 Reading Grades 3-5 - \$47,250

adding - EL Lexia English Student - \$7,416.67

Is this a Subscription/Software: Yes ☒ or No ☐

If yes, this is an internal form that does not need to be sent to the vendor.

Subscription/Software Name: Lexia Website: www.lexialearning.com

Subscription/Software Start Date: 07/01/2025 End Date: 06/30/2026

SOPPA Approved: Yes ☒ or No ☐

School Board President or Superintendent

Date

Requesting School: EL Students (original - 9 elementary schools)

Budget Code: ISEP Funding (original - Title I)

Signature of Vendor: N/A

Date:

Signature of Requestor:

Date:

Signature of Budget Administrator:

Date:

8/19/25